PTO/SB/17 (10-07)

Approved for use through 06/30/2010. OMB 0615-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Effective on 12/09/2004				s a valid OMB control number						
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 48	818).	Application Number 10/769,571								
FEE TRANSMITTAL	Application Num									
For FY 2008			January 30, 2004							
FUIF1 2000	First Named Inv		Thomas R. Apel							
Applicant claims small entity status. See 37 CFR 1.27	Examiner Name	- India	Matthew E. Warren							
TOTAL AMOUNT OF PAYMENT (\$) 810.00	Art Unit	2815	*****							
101AE AMOUNT OF FATILENT (\$) 810.00	Attorney Docket	No. 008.F	2001							
METHOD OF PAYMENT (check all that apply)										
Check ✓ Credit Card Money Order None Other (please identify):										
Deposit Account Deposit Account Number: Deposit Account Name:										
For the above-identified deposit account, the Director	is hereby authorized to:	: (check all tha	at apply)							
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee										
Charge any additional fee(s) or underpayments under 37 CFR 1.16 and 1.17	s of fee(s) Credit	any overpayr	ments							
WARNING: Information on this form may become public. Credit ca	ard information should no	ot be included	on this form. Pr	rovide credit card						
information and authorization on PTO-2038.										
FEE CALCULATION		<u> </u>								
1. BASIC FILING, SEARCH, AND EXAMINATION FE FILING FEES	E ES SEARCH FEES	EXAMINAT	TION FEES							
Small Entity	Small Entity	<u>s</u>	mall Entity	Food Bold (6)						
<u> </u>	Fee (\$) Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)						
1	510 255	210	105	 						
	100 50	130	65							
	310 155	160	80	······································						
	510 255	620	310							
Provisional 210 105	0 0	0	0							
2. EXCESS CLAIM FEES Fee Description			Fee (\$)	Small Entity Fee (\$)						
Each claim over 20 (including Reissues) 50 25										
Each independent claim over 3 (including Reissues	s)		210	105						
Multiple dependent claims	Coo Doid (A)		370	185						
Total Claims Extra Claims Fee (\$) - 20 or HP = x =	Fee Paid (\$)		Multiple De Fee (\$)	pendent Claims Fee Paid (\$)						
HP = highest number of total claims paid for, if greater than 20.			<u> 191</u>							
<u>Indep. Claims</u> <u>Extra Claims</u> <u>Fee (\$)</u> 3 or HP = x =	Fee Paid (\$)									
HP = highest number of independent claims paid for, if greater than	1 3.									
3. APPLICATION SIZE FEE	af manag (corel 1)		. بدادهای							
If the specification and drawings exceed 100 sheets of listings under 37 CFR 1.52(e)), the application size	of paper (excluding e ize fee due is \$260 (\$	electronically	y 111ea sequer Il entity) for	nce or computer						
sheets or fraction thereof. See 35 U.S.C. 41(a)(1))(G) and 37 CFR 1.1	6(s).		each additional Jo						
<u>Total Sheets</u> <u>Extra Sheets</u> <u>Number of each additional 50 or fraction thereof</u> <u>Fee (\$)</u>										
- 100 = / 50 = (round up to a whole number) x = 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)										
Other (e.g., late filing surcharge): RCE Fee										
				810.00						
SUBMITTED BY Signature	Registration No.		T-1	10 E02 E1E 0E1E						

(Attomey/Agent) 52,137 Name (Print/Type) Date November 6, 2008

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/17 (10-07)

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Under the Paperwork Reduction	on Act of 1995	no persons are requ	uired to re	U.S. Patent spond to a collection	and Trad of inform	emark Office nation unless	; U.S. DEPAR it displays a v	TMENT OF COMMER alid OMB control num	₹CE ber
Effective on 12/08/2004.				Complete if Known					
Pees pursuant to the Consolidated Appropriations Act, 2005 (A.R. 4616).			Application Number 10/76		10/769,57	/769,571			
FEE TRANSMITTAL			Filing Date Ja		January 30, 2004				
For FY 2008			First Named Inventor		Thomas R. Apel				
Applicant eleima amell ontitu atatus. See 27 CED 4 27				Examiner Name	Matthew E. Warren				
Applicant claims small entity status. See 37 CFR 1.27			Art Unit		2815				
TOTAL AMOUNT OF PAYMENT (\$) 810.00				Attorney Docket No. 008.P00					
METHOD OF PAYMENT (check all that apply)									
Check Credit (Card	Money Order	Non	e Other (n	desse ide	ntify)*			
Deposit Account D								<u></u>	-
For the above-identi				-					-
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				🚍			•	t for the filing fee	
under 37 CFF		(s) or underpayme .17	nts of fe	e(s) Credit	any ove	erpayments			
WARNING: Information on this information and authorization			t card inf	ormation should no	ot be incl	uded on this	s form. Provid	le credit card	
FEE CALCULATION									
1. BASIC FILING, SEAR	CH. AND	EXAMINATION	FEES						
	FILING	FEES		CH FEES	EXAM	INATION	-		
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$	Small Entity Fee (\$)	Fee	<u>Small (</u> (\$) Fee		Fees Paid (\$)	
Utility	310	155	510	255	210		•		
Design	210	105	100	50	130	65	· ;		
Plant	210	105	310	155	160	80) .		
Reissue	310	155	510	255	620	310) .		
Provisional	210	105	0	0	0) .		
2. EXCESS CLAIM FEE	S					_		all Entity	
<u>Fee Description</u> Each claim over 20 (i	ncludina P	aiccuae)					ee (\$) 50	Fee (\$) 25	
Each independent cla			ues)				210	105	
Multiple dependent c			,				370	185	
Total Claims					Mu	Itiple Deper	ndent Claims		
20 or HP = HP = highest number of total	claims paid fo	XX	- = —			<u>F</u>	ee (\$ <u>)</u>	Fee Paid (\$)	
Indep. Claims	Extra Clair	•	Fee	Paid (\$)					
- 3 or HP = HP = highest number of inder	endent claims	X	=						
3. APPLICATION SIZE		paid for, it greater to	iaii o.					•	
If the specification and									
listings under 37 CI sheets or fraction th						small ent	ity) for eac	h additional 50	
<u>Total Sheets</u>	Extra She	ets <u>Numbe</u>	er of eac	<u>h additional 50 o</u>	r fractio	n thereof	Fee (\$)	Fee Paid (\$)	
- 100 =	•	/ 50 =		_ (round up to a v	vhoie nu	mber) x		_=	-
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)							Fees Paid (\$	<u>3)</u>	
Other (e.g., late filing surcharge): RCE Fee							810.00	_	
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SUBMITTED BY	01.01	,	Т	Registration No			Talaskass	<u>.</u>	
Signature Registration No. (Attorney/Agent) 52,137						Telephone 503-615-9616			
Name (Print/Type) Joseph Pugh							Date Novem	ber 6, 2008	

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.